MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10729029

APPLICANT(S)

FILING DATE 12-05-03

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT					IND	DEP	IND	DEP	IND	DEP
1	/						51								
2		d					52								
3		7					53								
4		/					54								
5		μ					55								
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45							95								
46							96								
47							97								
48							98								
49							99								
50							100								
TOTAL IND.	/						TOTAL IND.								
TOTAL DEP.	4						TOTAL DEP.								
TOTAL CLAIMS	5						TOTAL CLAIMS								